

VEHICLE JUSTIFICATION					
UNIT/WING/REGION:			CHARTER NUMBER:		
VAN-PAX?	SEDAN	PICKUP	UTILITY	2 X 4	4 X 4
OTHER:					
JUSTIFICATION FOR VEHICLE (NEW, ADDITIONAL OR REPLACEMENT)					
UNIT SIZE	NO. SENIOR MEMBERS:		NO. CADETS:		
AREA OF RESPONSIBILITY:					
MISSION:					
IS THIS A REPLACEMENT VEHICLE? (Yes/No):					
IF REPLACEMENT, WHICH VEHICLE WILL IT REPLACE:					
VEHICLE UTILIZATION RATE OF VEHICLE TO BE REPLACED:					
COMMENTS:					
UNIT COMMANDER SIGNATURE AND REMARKS					
_____		_____		_____	
TYPE/PRINT NAME OF COMMANDER		SIGNATURE		DATE (MMM DD YY)	
REMARKS:					
WING COMMANDER SIGNATURE AND REMARKS					
_____			_____		
SIGNATURE			DATE (MMM DD YY)		
REMARKS:					
RANKED ORDER OF THIS REQUEST:					
REGION COMMANDER RECOMMENDATION AND REMARKS					
_____			_____		
SIGNATURE			DATE (MMM DD YY)		
REMARKS:					
NHQ CAP/LGT SIGNATURE AND REMARKS					
_____			_____		
SIGNATURE			DATE (MMM DD YY)		
REMARKS:					
CAP-USAF SIGNATURE					
_____		<input type="checkbox"/>	<input type="checkbox"/>	_____	
SIGNATURE		APPROVED	DISAPPROVED	DATE (MMM DD YY)	